24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	
	C C00504530
Check if X 24-hour report 48-hour report New report Amends report file	d on M = M / D = D / Y = Y = Y
Full Name of Payee	Data of Bullis Bishills the (Bissessinstins
Political Ink	Date of Public Distribution/Dissemination
Mailing Address 1220 19th Street NW	11 01 2016
Suite #502	Amount
City State Zip Code	10582.90
Washington DC 20036	Transaction ID : 001 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail Category/ Type 004	10 28 7 2016
Name of Federal Candidate Support Office	ce Sought: X House District: 16
Smucker, Lloyd, , ,	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought Disb 2016	oursement For: Primary X General Other (specify) ▶
Full Name of Payee Political Ink	Date of Public Distribution/Dissemination
Mailing Address 1220 19th Street NW	11 01 2016
Suite #502	Amount
City State Zip Code	12543.48
Washington DC 20036	Transaction ID : 002 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail Category/ Type 004	10 28 2016
Name of Foderal Condidate	
Hartman, Christina, , , Support Office Oppose	ce Sought: House District: 16 PA
Calendar Year-To-Date Dist	pursement For: Primary X General
Per Election for Office Sought 79962.04	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	23126.38
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	23126.38
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
2 4.10	11 02 2016
Signature	